

Annual SMR for Healthcare Facilities

Help sheet for the Industrial Online Reporting System

Annual SMR for Healthcare Facilities

Log into the Industrial Online Reporting System at:

<https://www.govonlinesaas.com/MN/SPL/Public2/GovEnt/Shared/Pages/Main/Login.aspx>

Opening the Annual SMR for Healthcare Facilities

From the “My Dashboard” tab, look for the submittal type “Annual SMR - Healthcare Facilities.”

The screenshot shows the MCES Industrial Online Reporting dashboard. The top navigation bar includes 'My Dashboard', 'Submittal', and 'My Account'. The user is logged in as 'Hello, Ashley'. The 'Upcoming Submittal Obligations' table lists 15 items, including 'Test Food Producer', 'Test Metal Finisher', 'Test Fortune 500 Company', and various 'TEST' entries. Each row has an 'Edit' button in the first column.

Edit	Facility	Submittal Type	Monitoring Point	Monitoring Period	Due Date	Status	Submit Date
Edit	Test Food Producer	Reporting Period Info SMR - Standard Discharges	SP-01	10/1/2015 - 12/31/2015	01/20/2016	Over Due	
Edit	Test Metal Finisher	Reporting Period Info SMR - Standard Discharges	SP-01	7/1/2015 - 12/31/2015	01/20/2016	Over Due	
Edit	Test Fortune 500 Company	Reporting Period Info SMR - Standard Discharges	SP-01	10/1/2015 - 12/31/2015	01/20/2016	Over Due	
Edit	# # TEST - Microbrew 1	Annual SMR - Microbrewery/Brewpubs	SP-01	1/1/2015 - 12/31/2015	01/20/2016	Over Due	
Edit	# # TEST - Special 6	Reporting Period Info SMR - Special Discharges	SP-RP SMR Discharge	10/1/2015 - 12/31/2015	01/20/2016	Over Due	
Edit	# # TEST - Zero 1	Annual SMR - Zero Discharge CILs	SP-01	1/1/2015 - 12/31/2015	01/20/2016	Over Due	
Edit	# # TEST - Standard 2	Sampling Results SMR - Standard Discharges	SP-02	7/1/2015 - 12/31/2015	01/30/2016	Over Due	
Edit	# # TEST - Standard 2	Sampling Results SMR - Standard Discharges	SP-01	7/1/2015 - 12/31/2015	01/30/2016	Over Due	
Edit	# # TEST - Special 6	Sampling Results SMR - Special Discharges	SP-01	10/1/2015 - 12/31/2015	01/30/2016	Over Due	
Edit	# # TEST - Special 6	Sampling Results SMR - Special Discharges	SP-02	10/1/2015 - 12/31/2015	01/30/2016	Over Due	
Edit	# # TEST - Standard 2	Permit Renewal Application - Standard Discharges	SP-01	12/2/2015 - 1/31/2016	01/31/2016	Over Due	

Click on the edit button in the “Edit” column for the respective submittal.

Completing the Annual SMR for Healthcare Facilities

The screenshot shows the 'ANNUAL SMR - HEALTHCARE FACILITIES (SUBMITTAL ID: 3980)' form. The form is divided into sections: 'General Information' and 'Report Summary'. The 'General Information' section includes fields for Facility Name, Facility Location, Mailing Address, County, Permit No., and Reporting Period. Below this is a table for 'Contact Information' with columns for Responsibility Type, Status, Salutation, First Name, Middle Initial, Last Name, Job Title, Contact Mailing Address, and Address Line 2. The 'Report Summary' section includes a question about changes in Facility Mailing address and a field for the total days of operation during the reporting period.

ANNUAL SMR - HEALTHCARE FACILITIES (SUBMITTAL ID: 3980)

Please fill out the form below.

General Information

Facility Name: #TEST - Hospital ALC
Facility Location: 1 TEST LN, ST PAUL, Hennepin, MN 55101
Mailing Address: 1 TEST Lane , ST PAUL, MN 55101
County: Hennepin
Permit No.: #H888
Reporting Period: 01/01/2016 - 12/31/2016

Carefully review your Facility's contact information below. To make updates to a contact, click on the icon to the very left. If a contact is no longer active at your facility, click on the icon to the right.

	Responsibility Type	Status	Salutation	First Name	Middle Initial	Last Name	Job Title	Contact Mailing Address	Address Line 2
	IU - Alternate IU - Auth Rep			Test		PERSON		1 TEST Lane	
	IU - Billing		Mrs	Money	P	Rocks	BILLING	1 TEST Ave	
	IU - Field IU - Primary		Mr	Hospital	K	People	PRESIDENT	1 Test Lane	

[Add New Contact](#)

* 1. Is there any change in Facility Mailing address? ☐ Yes ☐ No

Report Summary

* 2. Total days of operation during this reporting period

1. Data Entry

The grey header displays the facility's basic information. Before adding any information to the form, confirm that the information in this grey header is for the correct facility and reporting period. If the information is incorrect, please go back to the previous page and select the correct submission.

Step 1: Basic Information

Below the grey header there is a blue table that displays the facility's contact information.

Note: Scroll to the right of the screen to see all the information about the contact.

	Responsibility Type	Status	Salutation	First Name	Middle Initial	Last Name	Job Title	Contact Mailing Address
	Billing Field Primary Environmental Consultant		Mr	Test	E	Person	Primary	12 TEST Lane

Add New Contact

To remove: If the person no longer works at the facility change the status from **“Active”** to **“Inactive”** by clicking on the **green** check mark button in the status column of the table. The status will change to a **red** “X” mark.

	Responsibility Type	Status	Salutation	First Name	Middle Initial	Last Name	Job Title
	Field		Mr	Test	E	Person	Primary
	Signatory Authority		Mrs	Jane	E	Doe	Boss
	Primary		Mr	Test	E	Person	Primary
	Billing			John		Smith	Billing Specialist

To add: Click on the **yellow** **“Add New Record”** button. The page will display a pop up window for you to enter in the contact information for a new contact person. The required fields of information are denoted with a **red** asterisk. Then click on the blue **“Save”** button.

Facility Contact

Please fill in the form, all (*) fields are required.

Salutation:

Job Title:

* First Name:

Mid Initial:

* Last Name:

Status:

Active

* Contact Mailing Address:

Mailing Address Line 2:

* City:

* State:

* Zip:

* Phone No.: (XXX.XXX.XXXX)

Ext:

Fax No.: (XXX.XXX.XXXX)

* Email:

* Responsibility:

☐ Alternate

☐ Billing

☐ Designated Signatory

☐ Environmental Consultant

☐ Field

☐ Primary

☐ Signatory Authority

Save
Cancel

The blue table will be updated with the new contact person.

To edit: Click on the **“edit”** symbol (far left column) in the row of the respective person who's contact information needs to be updated. The page will display a pop up window for you to enter in the updated information. The required fields of information are denoted with a **red** asterisk. Then click on the blue **“Save”** button.

Name Change: If the person listed has a change in their name or you need to make a correction to the spelling of the name the form will not allow you to make the change. To make the correction, enter in the correct name in the box provided. Please also include a reason for the name correction.

To save the record, click on the blue **“Save”** button.

The blue table will be updated with the information that was provided in the pop-up window.

Next, answer question 1 (question below the blue table) to update the facility mailing address. If you select “Yes” for changes, additional fields will be displayed. The required fields are denoted with a **red** asterisk (*).

Step 2: Report Summary

Report Summary

- ★ 2. Total days of operation during this reporting period
- ★ 3. Average daily shift length during this reporting period:
- ★ 4. Average number of employees during this reporting period:

Answer questions 2 through 4 for the reporting period listed in the grey header.

2. To calculate the number of typical operating days, please refer to Section B.1.iii of the Industrial Discharge Permit issued to your facility. This section may have specific instructions on how to calculate the number of operating days. Otherwise, calculate the number of days as defined below.
Each calendar day with typical or greater than typical discharge activities, as allowed under this Permit, shall be considered one operating day. All other days shall be calculated as an appropriate fraction of one operating day.
3. Enter the average number of full-time employees working at the facility during the reporting period. Include office personnel and count two- (2) part-time employees as one- (1) full-time employee. Drivers, sales people, or other personnel who spend approximately ½ their time away from the office should be considered part-time employees. Round up to the nearest whole number.
4. Enter the number of working hours during a typical operating day.

Step 3: Volume Determinations for this Reporting Period

The volume determination is split into three sections:

- A) Incoming water sources
- B) Water not discharged to the sanitary sewer
- C) Wastewater discharged to the sanitary sewer

All volumes must be listed in gallons. To convert volume data from cubic feet to gallons, multiply the number in cubic feet by 7.48. Note that the difference between the “A Total” and the “B Total” must equal the “C Total.” However, volume determinations should follow the instructions listed in Section B.1.iii of the Industrial Discharge Permit.

A) Incoming Water Sources:

1. Enter volumes for all applicable water source categories that enter the facility during the reporting period.
2. Select the appropriate determination method from the drop-down menu.
3. Add in comments about the determination method or the volume itself. In some instances comments will be a required field.
4. Click on the calculate button at the bottom of the section. A value for the total incoming water sources will appear as a “read-only” field. If you make any changes to the volume in the rows above you must

click on the calculate button again to update the total volume.

A. Incoming water sources:			
	Volume in Gallons	Determination method	★ Comments
City Water Supply	33474000	Meter Readings v	
On-Site Well(s)		v	
Other		v	
Total	33474000		Calculate

B) Water not discharged to the sanitary sewer:

1. Enter the volumes for all applicable categories of water and/or wastewater that leave the facility by methods other than the sanitary sewer during the reporting period.
2. Select the appropriate determination method from the drop-down menu.
3. Add in comments about the determination method or the volume itself. In some instances comments will be a required field.
4. Click on the calculate button at the bottom of the section. A value for the total volume of water not discharged to the sanitary sewer will appear as a “read-only” field. If you make any changes to the volume in the rows above you must click on the calculate button again to update the total volume.

B. Water not discharged to sanitary sewer(Deduct):			
	Volume in gallons	Determination method	★ Comments
Lawn Irrigation	1751300	Meter Reading v	
Loss to Evaporation	8545700	Calculation/Estimation v	★ Total A - Total B
Other		v	
Total	10297000		Calculate

C) Wastewater discharged to the sanitary sewer:

1. Enter the volumes for all applicable categories of water and/or wastewater that leave the facility through discharge to the sanitary sewer during the reporting period.
2. Select the appropriate determination method from the drop-down menu.
3. Add in comments about the determination method or the volume itself. In some instances comments will be required field.
4. Click on the calculate button at the bottom of the section. A value for the total volume discharged to the sanitary sewer will appear as a “read-only” field. If you make any changes to the volume in the rows above you must click on the calculate button again to update the total volume.

Note: Unless metered separately (or noted differently in the Industrial Discharge Permit), the “Domestic Waste” volume may be calculated by assuming a generation rate of 20 gallons per day per full-time employee per operating day (i.e., (20) x (# of employees listed in #3 above) x (# operating days listed in #2 above)). In certain situations, “Industrial Waste” may be determined by subtracting from “A Total” minus “B Total” minus all other categories in “C.”

C. Wastewater discharged to sanitary sewer(Sewered):			
	Volume in gallons	Determination method	Comments
Non-contact Cooling Water	1482320	Meter Reading ▼	
Domestic Waste	2725050	Calculation/Estimation ▼	★ 20 gal/person/day
Industrial Waste	5721630	Meter Reading ▼	
Blowdown	1482320	Meter Reading ▼	
Other		▼	
Total	11411320		Calculate

Step 4: Supplemental Information

Supplemental Information

- ★ 5. Have there been significant operational changes in the discharge volume as describe in Section B. 10 of your active Permit since the last reporting period? ☐ Yes ☒ No
- ★ 6. During the reporting period, did the permittee adhere to the Best Management Practices(BMPs) found in Section C of your active Permit? ☒ Yes ☐ No
- ★ 7. Was non-required wastewater sampling conducted during the reporting period? ☒ Yes ☐ No
If yes, please attach analytical results and QA/QC data to submission.
- ★ 8. I certify that all sampling data that occurred during this reporting period was in conformance with Section A.1 of active Permit. ☒ Yes ☐ No
- ★ 9. Compliance Status: During the reporting period, the facility is: ☒ In compliance ☐ Not in compliance

Select the appropriate radio button to answer questions 5 through 9. Depending on the selection, the system may require you to add an explanation. A box will be provided when an explanation is required.

Click on the blue “**Save**” button before clicking the “**Next**” button.

General Comments

Extras

Below values are coming from previous page section - Volume determinations:

Total Incoming Water: 2236000 Total Water Discharged: 150000 Not Discharged to Sanitary Sewer: 668356

★ Please explain why Total Incoming Water is not equivalent to Total Water Discharged and Not Discharged to Sanitary Sewer.

General Report Comments and Explanation

Exit Save Previous Next

Extras

If the volumes you listed on the previous page do not balance to zero, this page will display an “Extras” section and you are required to enter an explanation for why the balance isn’t zero.

If the volumes do not balance but should (math error/data entry error), click on the blue “Previous” button on the bottom of the page to make corrections to the volume information.

If the volumes from the previous page do balance to zero, you will not see the “Extras” heading and the page will have a section for “General Report Comments and Explanation.”

General Report Comments and Explanation

If you have any comments about the information provided, please enter the comments in the field provided.

Then click on the “Save” button before clicking on the “Next” button.

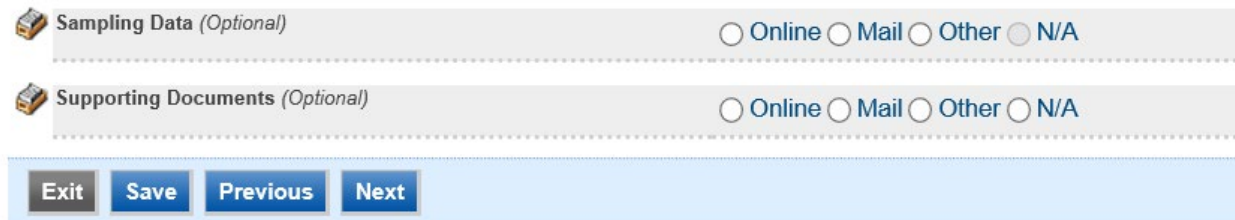
2. Attachment

The Attachment page allows you to select a method of providing supporting documents for the **Annual SMR**. More than one document can be uploaded to each attachment type.

Not all document types are “Required.” You do not have to select a radio button for attachments that are “Optional.”

To the right of each attachment type is a radio button to select how the information will be submitted.

Attachment



The interface shows two attachment types: "Sampling Data (Optional)" and "Supporting Documents (Optional)". Each has radio buttons for "Online", "Mail", "Other", and "N/A". Below these are four buttons: "Exit", "Save", "Previous", and "Next".

Online – If you select the “Online” option, the screen will show a **red** “Upload” button.

Attachment



The interface shows the "Sampling Data (Optional)" section with the "Online" radio button selected. Below it is a red "Upload" button with the text "(Please upload one file at a time. Repeat the Upload process if you have multiple files.)". Underneath is a text field labeled "Attachment description:" with a small icon to its right.

To proceed, click on the **Upload** button and the “**Browse**” button to search for the document that you would like to attach. Below the file name there is a comment field for you to add in a description about the attachment. The comment field is not required. Click on the blue “**Save**” button to attach the document to this submission. The Attachment page will update and show the name and the description of the document that you entered.

Note: More than one document can be uploaded to each attachment type.

If you attached a document in error, please click on the **red** “X” button to remove the attachment.

Mail - If you select the “Mail” option, the page will update to show the address the document should be mailed to. Please mail documents to:

Industrial Waste & Pollution Prevention Section
Metropolitan Council Environmental Services
390 Robert Street North
St Paul, MN 55101

3. Validation

The **Annual SMR** must pass the system validation before submission.



- In form Annual SMR - Healthcare Facilities:
 - Integer is required for question 3

Application Form(s) Summary



Annual SMR - Healthcare Facilities



Annual SMR - Healthcare Facilities - Form View



Basic Information



General Comments

Attachment(s) Summary



Sampling Data



Supporting Documents

Exit

Previous

Next

A **red** “X” indicates that this section of the form did not pass the validation.

To navigate to the error and make corrections, click on the wording next to the **red** “X.” Make the appropriate changes and save before going back to the validation page. **You will not be able to submit the report until the red X is cleared.**

A **green** check mark indicates that this section of the form passes the validation.

Previewing your Submission

On this page, there is a pdf link for you to preview the submission. To view, click on the “Preview My Submittal” link. This will launch a window for you to view your submission.

Note: Viewing this pdf does not mean that you have submitted the form. Look over the form but do not save a copy of the preview. When the form is successfully submitted, you will receive a final signed pdf version of the form via email.

After passing all validation checks, proceed to the Submission page by clicking on the blue “**Next**” button.

4. Submission

Only users with the account type Responsible Official (RO) can certify, sign, and submit reports using the online reporting system.

Consultants – If you are signed under an account type Consultant, you will see a **green** button “**Notify owner ready for review and submittal.**” Click on the button and an email notification will be sent to all Responsible Officials for this submittal stating that the submittal is ready for their review and submittal.

The Responsible Official must locate the submittal under the “Edit Pending Submittals” option from the “Submittal” tab on the home page. For instructions on how to find the submission, go to the “Editing an Unfinished Submittal” instructions to complete the submittal.

Certification of Submission

☐ * I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Question: What is your favorite song?

Answer:

PIN:

Security Precautions

To prevent your information from being used inappropriately, we maintain stringent electronic safeguards as well as other safeguards. In addition, the MCES Industrial Online Reporting System is powered by VeriSign's Certificates and Authorize .NET's PCI compliant processes. You are responsible for maintaining the confidentiality of your password. Please note that we may terminate your access to the MCES Industrial Online Reporting System at any time.

Disclaimer

The Metropolitan Council disclaims any and all liability from damages which may result from the accessing the MCES Industrial Online Reporting System.

Exit Previous **Notify owner ready for review and submittal**

This application can only be submitted by the owner or authorized agent. Please contact the owner or authorized agent stating this application is ready for his/her review and submittal.

Responsible Officials – If you are signed in under an account type Responsible Official you can complete the submittal.

Certification of Submission

☒ * I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Security Precautions

To prevent your information from being used inappropriately, we maintain stringent electronic safeguards as well as other safeguards. In addition, the MCES Industrial Online Reporting System is powered by VeriSign's Certificates and Authorize .NET's PCI compliant processes. You are responsible for maintaining the confidentiality of your password. Please note that we may terminate your access to the MCES Industrial Online Reporting System at any time.

Question: what is your favorite book?

Answer:

PIN:

Disclaimer

The Metropolitan Council disclaims any and all liability from damages which may result from the accessing the MCES Industrial Online Reporting System.

Exit Previous **Submit**

Please read through the certification statement and check the box.

Answer the security question and enter your PIN number in the appropriate boxes.

If you forgot your security question or PIN, hit exit and go to **My Account**. You can reset your security question answers and request a new PIN. After you have made changes, go back to the submittal to complete the submission process. For instructions on opening an unfinished submittal, see section **Editing an Unfinished Submittal**.

Click on the blue “**Submit**” button at the bottom of the page to submit the **Annual SMR**.

Copy of Record

After submitting the Annual SMR, you will see a Copy of Record (COR) receipt. The COR includes information on who submitted the form, which form was submitted, attachments, etc. You will also receive an email that includes this information. The email includes an Adobe Acrobat pdf file of the submission for your records.

[Go to Submitted List](#)

Submittal ID: **4020**

Submitted By:

Jane Doe
455 Etna Street
St Paul, MN 55106
6516024789

Owner Info:

Jane Doe
455 Etna Street
St Paul, MN 55106
6516024789

Submitted on: 3/31/2017 3:38:49 PM

Form Detail

- Annual SMR - Healthcare Facilities

Attachment Detail

Sampling Data (Required) -- Mail

Please mail to:
Industrial Waste & Pollution Prevention Section
Metropolitan Council Environmental Services

Supporting Documents (Optional) --

Certification Receipt

Certification
Statement:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Certification
Question:

What is your favorite book?

Certification
Question Answer:

PIN Number:

Viewing Submittals

From the home page, hover over the “**Submittal**” tab and select “**Manage Submitted Cases.**”

The grid view under the “Submittal List” shows details about the submittal, submitted date, review status, and monitoring period. The **Status** types are:

- Complete Submittal – Report has been submitted by the Responsible Official.
- Partial Submittal – Report has been submitted by the Responsible Official, however, the user designated that they would mail in an attachment rather than submitting the document online.
- Approved – Report has been accepted by the Metropolitan Council and is under further review.
- Revision Archived – You or the Metropolitan Council has requested a revision on the submittal.

To view a submission, click on the **yellow “View”** button.

Submittal ID: Submittal Status: Submitted Date: ~

Category: Department: Program: Submittal Type:

Facility Name: Permit Number:

Monitoring Period: ~ Report Due Date: ~

Request for:

Submittal List

1 - 3 of 3 item(s)

Detail	Submittal Information	Submitted Date	Review Status	Facility Information	Monitoring Period
View	4020 - Annual SMR for Healthcare Facilities Department Type: REPORT Program Type: HOSP Form Type: HOSP PermitNo.: #H888	03/31/2017 15:38 PM	Partial Submittal	##TEST - ALC HOSPITAL	01/01/2002 ~ 12/31/2002

This page displays the basic information about the submittal with tabs to click on for further information.

[Back to Search](#)


Partial Submittal

(4020) Annual SMR for Healthcare Facilities

Submitted on: 3/31/2017 3:38:49 PM (Timespan: 0 Business Days)

Facility: ##TEST - ALC HOSPITAL

Address: 1 TEST Lane , ST PAUL, MN 55101

Owner: Ashley Corbeille

Form Type: HOSP

Permit#: #H888

Monitoring Period: 01/01/2002 ~ 12/31/2002

Due Date:

Required Documents: 1 (Non-Review: 1)

Receipt: [Click on this](#)

Send **Notification**

Original/Revision

Submittal

Attachment

Correspondence

Email History

Click the form link under "Application Form(s) Detail" to view the submitted Application Form.

Application Basic Information

Submittal ID: 4020

App Name: Annual SMR for Healthcare Facilities

Submitted Date: 3/31/2017 3:38:49 PM

Submitted by: Jane Doe
455 Etna Street
St Paul, MN 55106
6516024789

Review Status: Partial Submittal

Application Form(s) Detail

Online Annual SMR - Healthcare Facilities Annual SMR - Healthcare Facilities - Form View

Application Revision

★ Reason for Revision:

Request for Revision

Submittal Information Tabs

- **Submittal** – for viewing the submission in an online form or an Adobe pdf file.
If you found an error in the information submitted and would like to resubmit, enter in a reason in the box provided under the heading “Application Revision” and click on the blue **“Request for Revision”** button. See **“Editing a Completed Submittal”** for further instructions.
- **Attachment** – for viewing documents that you attached to the submittal. If you choose to mail in the documentation, please mail to:
Industrial Waste & Pollution Prevention Section
Metropolitan Council Environmental Services
390 Robert Street North
St Paul, MN 55101
- **Correspondence** – for sending messages to your Industrial Waste & Pollution Prevention permit administrator.
- **Email History** – for viewing system generated emails that are tied to the submittal. You can click on the icon under the “Detail” column to see the contents of the email.

Editing an Unfinished Submittal

Log into the Industrial Online Reporting System at:

<https://www.govonlinesaas.com/MN/SPL/Public2/GovEnt/Shared/Pages/Main/Login.aspx>

Hover the cursor over the “Submittal” tab and click on “Edit Pending Submittals.”

MCES Industrial Online Reporting

My Dashboard | Submittal | My Account | Hello, Ashley | Help | Logout

Upcoming Submittal Obligations

Facility	Submittal Type	Monitoring Point	Monitoring Period	Due Date	Status	Submit Date
Test Food Producer	Reporting Period Info SMR - Standard Discharges	SP-01	7/1/2015 - 9/30/2015	10/20/2015	Over Due	
Test Fortune 500 Company	Reporting Period Info SMR - Standard Discharges	SP-01	7/1/2015 - 9/30/2015	10/20/2015	Over Due	
Test Fortune 500 Company	Sampling Results SMR - Standard Discharges	SP-01	7/1/2015 - 9/30/2015	10/31/2015	Over Due	
Test Fortune 500 Company	Sampling Results SMR - Standard Discharges	SP-02	7/1/2015 - 9/30/2015	10/31/2015	Over Due	
Test Fortune 500 Company	Sampling Results SMR - Standard Discharges	SP-01	7/1/2015 - 9/30/2015	10/31/2015	Over Due	
##TEST - Microbrew 2	Annual SMR - Microbrewery/Brewpubs	SP-01	1/1/2015 - 12/31/2015	01/20/2016	Over Due	
Test Food Producer	Reporting Period Info SMR - Standard Discharges	SP-01	10/1/2015 - 12/31/2015	01/20/2016	Over Due	
Test Metal Finisher	Reporting Period Info SMR - Standard Discharges	SP-01	7/1/2015 - 12/31/2015	01/20/2016	Over Due	
Test Fortune 500 Company	Reporting Period Info SMR - Standard Discharges	SP-01	10/1/2015 - 12/31/2015	01/20/2016	Over Due	
Nobles County Landfill	Sampling Results SMR - Special Discharges	SP-01	10/1/2015 - 12/31/2015	01/30/2016	Over Due	
##TEST -	Sampling Results SMR - Standard	SP-02	7/1/2015 -	01/30/2016	Over	

Use the search criteria to locate the **Annual SMR** that was previously started.

Note: Click on the blue “Search” each time you make a change to the search criteria. The search feature only updates when this button is pressed.

Submittal ID:

Category: Department: Program: Submittal Type:

Facility Name: Permit Number:

Monitoring Period: ~ Report Due Date: ~

Unfinished Submittals

1 - 1 of 1 item(s)

Delete	Edit	Submittal Information	Facility Name	Form Type	Report Frequency	Monitoring Period	Due Date	Status	Last Updated Date
		4021 - Annual SMR for Healthcare Facilities Department Type: REPORT Program Type: HOSP PermitNo.: #H888 Status: Open	##TEST - ALC HOSPITAL	Annual SMR - Healthcare Facilities		01/01/2003 ~ 12/31/2003	01/31/2004	Open	03/31/2017 15:50 PM

To open the unfinished submittal, click on the “Edit” button (pencil and paper icon). Proceed to the **Completing the Annual SMR for Healthcare Facilities** section.

Editing a Completed Submittal – Request for Revision

Once you have made a submission, you will need to send a **Request for Revision** to the Metropolitan Council to make changes.

From the home page, hover over the “Submittal” tab and select “**Manage Submitted Cases.**”

The screenshot shows the MCES Industrial Online Reporting interface. The top navigation bar includes 'My Dashboard', 'Submittal', and 'My Account'. The 'Submittal' tab is active, and a dropdown menu is open, highlighting 'Manage Submitted Cases'. The dropdown menu options include: 'Start a New Submittal', 'My Favorite Submittal Types', 'Edit Pending Submittals', 'Track Submittal', 'Manage Submitted Cases' (highlighted), 'Manage Permits/Certs.', 'Correspondence Msg', 'Email History', and 'Link Paper Submissions'. The 'Manage Submitted Cases' option is highlighted in yellow. Below the dropdown, a table titled 'Upcoming Submittal Obligations' displays 25 items. The table columns are: Facility, Submittal Type, Monitoring Point, Application Category, Monitoring Period, Due Date, Status, and Submit Date. The table shows various submittal types such as 'Reporting Period Info SMR - Standard Discharges', 'Annual SMR - Zero Discharge CIUs', and 'Sampling Results SMR - Standard Discharges'.

Facility	Submittal Type	Monitoring Point	Application Category	Monitoring Period	Due Date	Status	Submit Date
##TEST - Standard 6	Reporting Period Info SMR - Standard Discharges	SP-01	1	1/1/2015 - 12/31/2015	01/20/2016	Over Due	
##TEST - Special 5	Reporting Period Info SMR - Special Discharges	SP-01	1	10/1/2015 - 12/31/2015	01/20/2016	Over Due	
##TEST - Std Pmt	Reporting Period Info SMR - Standard Discharges	SP-01	1	7/1/2015 - 12/31/2015	01/20/2016	Over Due	
##TEST - Zero 1	Annual SMR - Zero Discharge CIUs	SP-01	1	1/1/2015 - 12/31/2015	01/20/2016	Over Due	
##TEST - Standard Pmt	Reporting Period Info SMR - Standard Discharges	SP-01	1	1/1/2015 - 12/31/2015	01/20/2016	Over Due	
##TEST - Standard 6	Sampling Results SMR - Standard Discharges	SP-01	1	1/1/2015 - 12/31/2015	01/30/2016	Over Due	
##TEST - Special 5	Sampling Results SMR - Special Discharges	SP-01	1	12/1/2015 - 12/31/2015	01/30/2016	Over Due	
##TEST - Special 5	Sampling Results SMR - Special Discharges	SP-01	1	1/1/2016 - 1/31/2016	03/30/2016	Over Due	
##TEST - Special 5	Sampling Results SMR - Special Discharges	SP-01	1	2/1/2016 - 2/29/2016	03/30/2016	Over Due	
##TEST - Special 5	Reporting Period Info SMR - Special Discharges	SP-01	1	1/1/2016 - 3/31/2016	04/20/2016	Over Due	

Use the search criteria to find the submittal that needs revision.

Note: You will only be able to request a revision online if the Metropolitan Council has not yet reviewed and accepted the submittal (Review Status is Complete or Partial Submittal). If the submittal has the Review Status of “Approved” you will need to contact your Industrial Waste & Pollution Prevention permit administrator to make changes.

Submittal ID: Submittal Status: (All) Submitted Date: ~

Category: Report Department: (All) Program: (All) Submittal Type: Annual SMR for Healthcare Facilities

Facility Name: (All) Permit Number: (All)

Monitoring Period: ~ Report Due Date: ~

Request for:

Submittal List					
1 - 3 of 3 item(s)					
Detail	Submittal Information	Submitted Date	Review Status	Facility Information	Monitoring Period
View	4020 - Annual SMR for Healthcare Facilities Department Type: REPORT Program Type: HOSP Form Type: HOSP PermitNo.: #H888	03/31/2017 15:38 PM	Partial Submittal	##TEST - ALC HOSPITAL	01/01/2002 ~ 12/31/2002

Click on the **yellow View** button adjacent to the submittal you want to edit.

[Back to Search](#)



(4020) Annual SMR for Healthcare Facilities

Submitted on: 3/31/2017 3:38:49 PM (Timespan: 0 Business Days)

Facility: ##TEST - ALC HOSPITAL

Address: 1 TEST Lane , ST PAUL, MN 55101

Owner: Ashley Corbeille

Form Type: HOSP

Permit#: #H888

Monitoring Period: 01/01/2002 ~ 12/31/2002

Due Date:

Required Documents: 1 (Non-Review: 1)

Receipt: [Click on this](#)

Send [Notification](#)

[Original/Revision](#)

[Submittal](#)
[Attachment](#)
[Correspondence](#)
[Email History](#)

Click the form link under "Application Form(s) Detail" to view the submitted Application Form.

Application Basic Information

Submittal ID:	4020
App Name:	Annual SMR for Healthcare Facilities
Submitted Date:	3/31/2017 3:38:49 PM
Submitted by:	Jane Doe 455 Etna Street St Paul, MN 55106 6516024789
Review Status:	Partial Submittal

Application Form(s) Detail

 Online Annual SMR - Healthcare Facilities
  Annual SMR - Healthcare Facilities - Form View

Application Revision

★ Reason for Revision:

[Request for Revision](#)

From the “**Submittal**” tab, under the heading **Application Revision** click in the “**Reason for Revision**” box and provide an explanation for the revision. Click the blue button **Request for Revision**. This will send an email message to the Metropolitan Council.

The Metropolitan Council will review the request and send the User an email message approving or denying the request.

If the request is approved:

- log into the Industrial Online Reporting System
- hover the cursor over the “Submittal” tab and click on the “Edit Pending Submittals”
- search for the submittal with the status of “Revision” and click on the edit button
- make the change and resubmit the report

Note – The submission with the status of “Revision” is the exact copy of what you previously submitted.